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## BIB DATA SHEET

CONFIRMATION NO. 8541

<b>SERIAL NUMBER</b> 10/534,626	<b>FILING or 371(c) DATE</b> 05/11/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> 4239-67020-02
<b>APPLICANTS</b> Toren Finkel, Bethesda, MD; Jonathan M Hill, London, UNITED KINGDOM; Arshed A Quyyumi, Atlanta, GA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/36317 11/12/2003 which claims benefit of 60/426,545 11/15/2002 and claims benefit of 60/445,417 02/05/2003				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/SUMESH KAUSHAL/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWINGS</b> 6	<b>TOTAL CLAIMS</b> 35
<b>INDEPENDENT CLAIMS</b> 6				
<b>ADDRESS</b> KLARQUIST SPARKMAN, LLP 121 S.W. SALMON STREET SUITE #1600 PORTLAND, OR 97204-2988 UNITED STATES				
<b>TITLE</b> Method for diagnosis and treatment of vascular disease				
<b>FILING FEE RECEIVED</b> 1750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	